

## Enter & View

# New Medical Centre

264 Brentwood Road, Romford RM2 5SU

10 July 2017



## What is Healthwatch Havering?

Healthwatch Havering is the local consumer champion for both health and social care in the London Borough of Havering. Our aim is to give local citizens and communities a stronger voice to influence and challenge how health and social care services are provided for all individuals locally.

We are an independent organisation, established by the Health and Social Care Act 2012, and employ our own staff and involve lay people/volunteers so that we can become the influential and effective voice of the public.

Healthwatch Havering is a Company Limited by Guarantee, managed by three part-time directors, including the Chairman and the Company Secretary, supported by two part-time staff, and by volunteers, both from professional health and social care backgrounds and lay people who have an interest in health or social care issues.

### Why is this important to you and your family and friends?

Following the public inquiry into the failings at Mid-Staffordshire Hospital, the Francis report reinforced the importance of the voices of patients and their relatives within the health and social care system.

Healthwatch England is the national organisation which enables the collective views of the people who use NHS and social services to influence national policy, advice and guidance.

Healthwatch Havering is your local organisation, enabling you on behalf of yourself, your family and your friends to ensure views and concerns about the local health and social services are understood.

Your contribution is vital in helping to build a picture of where services are doing well and where they need to be improved. This will help and support the Clinical Commissioning Groups, NHS Services and contractors, and the Local Authority to make sure their services really are designed to meet citizens' needs.

***'You make a living by what you get,  
but you make a life by what you give.'***  
***Winston Churchill***

## What is Enter and View?

Under Section 221 of the Local Government and Public Involvement in Health Act 2007, Healthwatch Havering has statutory powers to carry out Enter and View visits to publicly funded health and social care services in the borough, such as hospitals, GP practices, care homes and dental surgeries, to observe how a service is being run and make any necessary recommendations for improvement.

These visits can be prompted not only by Healthwatch Havering becoming aware of specific issues about the service or after investigation, but also because a service has a good reputation and we would like to know what it is that makes it special.

Enter & View visits are undertaken by representatives of Healthwatch Havering who have been duly authorised by the Board to carry out visits. Prior to authorisation, representatives receive training in Enter and View, Safeguarding Adults, the Mental Capacity Act and Deprivation of Liberties. They also undergo Disclosure Barring Service checks.

Occasionally, we also visit services by invitation rather than by exercising our statutory powers. Where that is the case, we indicate accordingly but our report will be presented in the same style as for statutory visits.

Once we have carried out a visit (statutory or otherwise), we publish a report of our findings (but please note that some time may elapse between the visit and publication of the report). Our reports are written by our representatives who carried out the visit and thus truly represent the voice of local people.

We also usually carry out an informal, follow-up visit a few months later, to monitor progress since the principal visit.

## Background and purpose of the visit:

Healthwatch Havering is aiming to visit all health and social care facilities in the borough. This is a way of ensuring that all services delivered are acceptable and the safety of the resident, patient or other service-user is not compromised in any way.

## The premises

The Medical Centre is located in a large converted house. There is a large waiting area, which is light and airy, and leads out to a garden. On first impression the decor appeared tired, but the Patient Participation Group (PPG) informed the team that planning permission had been granted for an extension, following construction of which the decor would be attended to.

The downstairs area comprises reception, waiting and consulting rooms, clinical room, offices and a toilet. There is a lift to the first floor where physiotherapy is undertaken. The nurses are also based there.

There is a ramp into the building, with disabled access. Limited parking is available at the premises, reserved mainly for the GPs but with some spaces for disabled patients; but the side roads nearby seemed easy to park in.

## Reception

The reception area is adequate. There is an electronic check in. Hand sanitizers are available on the reception desk, and in the toilet. A hearing loop is provided for patients whose hearing is impaired, and a translation service is available.

The reception area is busy, and not very private, but an area has been set aside for private conversation with the receptionist.

The staff appeared friendly and helpful.

## Waiting room

The waiting room is a large area that opens out to a garden. There is a television with rolling information of services and a very large display of information leaflets, with posters around the room regarding NHS111 services, the GP hub, the PPG and the Healthwatch visit.

A loudspeaker system is used to call the patient to the doctor.

At the time of the visit, the overall area was clean and tidy.

## The patient's experience

At the time of the visit, 9,832 patients were registered the Centre; **the team were told that the surgery apparently has the oldest population in the whole of England.**

The surgery opening times are 8am-6.30pm, with a lunch hour closure 1pm-2pm; on Tuesday and Wednesday the Centre was open until 8pm. 276 appointment sessions are available each week.

The Centre closes Thursday afternoon to enable administrative tasks to be carried out but is open for appointments to be made.

Appointments can be booked on-line or by telephoning the surgery from 8am. Appointments can be booked up to 48 hours in advance, or on the day. The GPs organise the slots and screen requests for emergency appointments.

Telephone consultations are undertaken Tuesday and Wednesday evenings, or in the morning on other days.

Patients are also advised that they can book an appointment with the GP hub.

## Prescriptions

Requests for repeat prescriptions must be submitted 48 hours in advance, online or by being dropped in. It is hoped that by September

2017, this would be fully electronic but at the time of the visit there were “teething problems”, particularly with the NHS spine.

Prescription reviews are undertaken by an independent external drugs company.

### Blood and other tests

A leaflet is available at the reception desk, detailing where blood tests can be undertaken. All test results and follow up letters are sent directly to the GP electronically. The GP decides the way forward: whether to book an appointment, to call the patient, or another relevant approach.

Recommendations from Consultants are scanned and put into the GPs’ workflows. The aim is to deal with referral responses within ten days.

### Minor Surgery

Patients (other than the elderly, who are dealt with at the Centre) go to Harold Wood Polyclinic for the removal of sutures. Verrucas and warts are attended to at the surgery.

### Long-term conditions

Specific clinics for patients with long-term conditions are run by nurses, including smear tests.

### Elderly patients and those living with dementia

All patients over 70 have a named GP, and one specific GP covers dementia.

A new project is being piloted, the “Glass project”. It works with the dementia and frailty register and involves the CCG, ICM (integrated care management), the 3 GPs, a consultant from Queen’s Hospital, Social Workers and district nurses. All participating professionals take part in Skype conference calls. Patients are seen on a Thursday afternoon, and are told it’s an “MOT”.

In addition, a further initiative has been put in place called the “gold card”, which is given to patients/carers who have limited life expectancy, and gives priority for prescriptions and other attention, without having to explain all details at reception.

### Patients with Learning Disability (LD) annual health check.

All LD patients have had an annual health check. Reviews are undertaken in September. A pack is given to carers containing all relevant information.

### Complaints

There is a complaints box and leaflet. The Practice Manager and the 3 GPs deal with any complaints. The complainant is invited in to discuss the situation. If needs be they are advised that they can contact the NHS Ombudsman.

All complaints are discussed at a Significant Events meeting in February.

### The Staff

The staff of the Centre includes 3 permanent GPs, a Practice Manager, a Nurse Practitioner and 2 Practice Nurses, 1 Healthcare Practitioner, 12 job share staff in reception and 6 Administration Staff. The GPs work in the GP hub and provide GP support for Ashling House residential care home and Abb Cross Nursing Home, both of which are nearby.

### Staff training

The IG tool kit is used. All mandatory training is covered.

### Administration concerns

The team asked two questions relating to administration: the first was whether there were delays in obtaining the records of new patients who join the practice. The team were informed that the process was

very poor; it was managed by outside contractors but there was no coherence to the process.

The second question related to getting appointments at Queen's Hospital. The team were told that it was very difficult to obtain them.

### Patients' views

The team was able to speak only with one patient, who told them that he had had to wait 20 minutes to get through when phoning for an appointment.

### Patients Participation Group

There is an excellent, proactive PPG, with 11 active members. The Chair and five other members attended the visit; the Chair had worked with the surgery for over 20 years.

The PPG meet monthly, hold open evenings and organise talks of interest for patients. The subjects of talks have included COPD, Chronic Heart Disease and Osteoporosis. The PPG also do a lot of fundraising, and work hand in hand with the GPs.

For Carers' Week they displayed a lot of literature in the surgery, including how to access services.

### PPG initiatives

At the time of the visit, the PPG was working on an initiative to reduce the number of failures to attend for appointments - DNAs (do not attends) - at the surgery. In May 2017, 137 patients had missed appointments. The PPG have devised a letter that is sent to patients who have missed appointments, who are asked to complete a survey as to why they had failed to attend. The letter points out that the missed appointment has cost the NHS £40, and suggests that patients might wish to "feel free to make a voluntary donation". It was noted that



installation of a system for generating reminders of appointments by text message was due to be installed, to supplement the existing facility for online cancellations.

The PPG were also working with surgery to purchase an appointment text reminder service and were currently fund-raising for a new ECG machine.

**Healthwatch considers that the PPG is to be commended for these initiatives.**

### Conclusion

The team felt that this appeared to be a very patient-focused, innovative practice.

Although the decor is tired at present, the work for the extension would soon be carried out, enabling the accommodation to be refreshed.

The team particularly noted, and welcomed, that the PPG play a very active role in the Centre.

### Recommendations

That:

- 1 Work continue to ease the situation with new patients' notes
- 2 Pressure be applied to Barking, Havering and Redbridge University Hospitals Trust to improve the procedure for obtaining appointments at BHRUT
- 3 The process for telephone contact with the Centre be reviewed to ensure that patients are not left waiting for an answer for excessive periods
- 4 The time lost to DNAs be publicised, as well as the cost, to maximise patient impact and encourage changed behaviour, with

emphasis on the ability to cancel unwanted appointments online and (when available) the fact that reminders can be sent by text

- 5 The welcome effective working with the PPG continue and be further developed.

**Healthwatch Havering thanks all service users, staff and other contributors who were seen during the visit for their help and co-operation, which is much appreciated.**

### **Disclaimer**

This report relates to the visit on 10 July 2017 and is representative only of those service users, staff and other contributors who participated. It does not seek to be representative of all service users and/or staff.

## Participation in Healthwatch Havering

Local people who have time to spare are welcome to join us as volunteers. We need both people who work in health or social care services, and those who are simply interested in getting the best possible health and social care services for the people of Havering.

Our aim is to develop wide, comprehensive and inclusive involvement in Healthwatch Havering, to allow every individual and organisation of the Havering Community to have a role and a voice at a level they feel appropriate to their personal circumstances.

**We are looking for:**

### Members

This is the key working role. For some, this role will provide an opportunity to help improve an area of health and social care where they, their families or friends have experienced problems or difficulties. Very often a life experience has encouraged people to think about giving something back to the local community or simply personal circumstances now allow individuals to have time to develop themselves. This role will enable people to extend their networks, and can help prepare for college, university or a change in the working life. There is no need for any prior experience in health or social care for this role.

The role provides the face to face contact with the community, listening, helping, signposting, providing advice. It also is part of ensuring the most isolated people within our community have a voice.

Some Members may wish to become **Specialists**, developing and using expertise in a particular area of social care or health services.

### Supporters

Participation as a Supporter is open to every citizen and organisation that lives or operates within the London Borough of Havering. Supporters ensure that Healthwatch is rooted in the community and acts with a view to ensure that Healthwatch Havering represents and promotes community involvement in the commissioning, provision and scrutiny of health and social services.

## Interested? Want to know more?



Call us on **01708 303 300**

email [enquiries@healthwatchhaverling.co.uk](mailto:enquiries@healthwatchhaverling.co.uk)



Find us on Twitter at [@HWHavering](https://twitter.com/HWHavering)



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